

PERSONAL AND CONFIDENTIAL

CC: J. G. Loschiavo
P. Thistleton

October 7, 1982

AR226-1624

TO: W. T. DARNELL
② T. M. KEMP

FROM: R. J. ZIPFEL *RJZ #18*

① Bob Taylor,
We have no retine blood C-8
data. Is the C-8 data taken
mainly on Teflon® and retires
or special revisions required?
Loschiavo just needs some data
C-8 ELIMINATION RATES which he indicates we
are not now getting?

C-8 blood data received to date is not adequately defining the long term equilibrium C-8 blood level in our employees, or the elimination rate in employees no longer exposed to C-8.

One of the objectives of our present C-8 program is to determine the correlation of C-8 blood levels to personal C-8 exposure levels. These data are critical if we are to determine the future normal C-8 blood levels that our employees will have. (Note: Based on present information C-8 blood levels will always be above the detectable point in the future.) At some later point we will need to make a firm assessment as to the safety of this normal level.

*This is
needed!*

A key point in this study is the determination of human C-8 elimination rates for both males and females. Presently, we are only obtaining these data from the females who left TEFLON® in April, 1981. No such data exists for males, who are the employees with the highest C-8 blood levels. According to Haskell Lab the only way to get statistically accurate data is to monitor personnel who are no longer exposed to C-8.

It has been proposed by Plant ER and SHE personnel that data presently being collected from the TEFLON® males is adequate for this purpose. We feel that due to the complication factors of daily exposure variability and an extremely long half-life (> 12 months) that the determination of the elimination rate from these data could take an additional 5 years. The elimination rate determined via these data will always be questionable as to accuracy.

The only way we know, and Haskell Lab concurs, to determine a statistically accurate elimination rate (or half-life) for C-8 is to monitor males who have high C-8 levels and have left TEFLON®. This means the monitoring of TEFLON® retirees.

We believe this point to be very important and critical in our C-8 program. I will be glad to discuss this further with you.

RJZ/nsw
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